

## COVID-19 Declaration – Contractor

The below declaration needs to be completed before you will be allowed access onto any site.

I, \_\_\_\_\_ declare that I have not:  
(name)

- Arrived in New Zealand, from another country, in the last 14 days.
- Had family or friends staying (or been in close proximity to someone) who have recently arrived from overseas countries.
- Had any signs of illness including fever, dry cough, sore throat or difficulty breathing.
- Had anyone living in my household become ill with flu like symptoms.
- Met any of the Ministry of Health conditions below (and must be self-isolating):
  - Are over 70
  - Have any underlying medical conditions such as respiratory conditions, heart conditions, high blood pressure, kidney problems or diabetes
  - Are undergoing a treatment for cancer or blood conditions
  - Pregnant

Signed: \_\_\_\_\_

Full Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Employer: \_\_\_\_\_

Contact (Company host) \_\_\_\_\_

If this declaration cannot be made fully (you have answered 'yes' to any of the statements), then please contact the below person before access is permitted:

\_\_\_\_\_